

22764 U.S.PTO

GIRARD & EQUITZ LLP
400 Montgomery Street, Suite 1110, San Francisco, CA 94104
415/433-2250

Address to:

Mail Stop PATENT APPLICATION
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Attorney's Docket No. PRKR-4700

First Named Inventor KEVIN P. PARKER

UTILITY PATENT APPLICATION TRANSMITTAL
(under 37 CFR 1.53(b))

SIR:

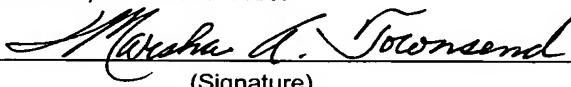
Transmitted herewith for filing is the patent application entitled:

BINDER STRIP CASSETTE

CERTIFICATION UNDER 37 CFR § 1.10

I hereby certify that this New Application and the documents referred to as enclosed herein are being deposited with the United States Postal Service on this date March 15, 2004, in an envelope bearing "Express Mail Post Office To Addressee" Mailing Label Number EV 322540218 US addressed to: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Marsha A. Townsend
(Name of person mailing paper)


(Signature)

Enclosed are:

1. Transmittal Form (two copies required)
2. The papers required for filing date under CFR § 1.53(b):
 - i. 26 Pages of specification (including claims and abstract);
 - ii. 18 Sheet of drawings.

<input type="checkbox"/> formal	<input checked="" type="checkbox"/> informal
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3. Declaration or oath
 - a. Original – [UNSIGNED]
4. Microfiche Computer Program (Appendix, see 37 CFR 1.96)
5. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)

ACCOMPANYING APPLICATION PARTS

6. An assignment of the invention to is attached (including Form PTO-1595).
 - i. 37 CFR 3.73(b) Statement (when there is an assignee)
7. Power of Attorney
8. An Information Disclosure Statement (IDS) is enclosed, including a PTO-1449 and copies of references.
9. Preliminary Amendment.
10. Return Receipt Postcard (MPEP 503 -- should be specifically itemized)
11. Other - Request and Certification Under 35 U.S.C. 122(b)(2)(B)(i).

12. FOREIGN PRIORITY

Priority of application no. _ filed on _ in _ is claimed under 35 USC 119.

13. FEE CALCULATION

a. Amendment changing number of claims or deleting multiple dependencies is enclosed.

CLAIMS AS FILED

	Number Filed	Number Extra	Rate	Basic Fee (\$770)
Total Claims	32 - 20	*12	x \$18.00	216.00
Independent Claims	3 - 3	*0	x \$86.00	0
<input type="checkbox"/> Multiple dependent claim(s), if any			\$290.00	0

*If less than zero, enter "0".

Filing Fee Calculation \$986.00

50% Filing Fee Reduction (if applicable) \$493.00

14. Small Entity Status

- Small entity status is claimed.
- A small entity statement was filed in the prior nonprovisional application and such status is still proper and desired.
- is no longer claimed.

15. Other Fees

- Recording Assignment [\$40.00]
- Other fees
Specify _____

Total Fees Enclosed \$0

16. Payment of Fees

- A check in the amount of \$__ is enclosed.
- Charge Account No. 50-1697 in the amount of \$__.

A duplicate of this transmittal is attached.

17. All correspondence regarding this application should be forwarded to the undersigned attorney:

Philip A. Girard
GIRARD & EQUITZ LLP
400 Montgomery Street, Suite 1110
San Francisco, CA 94104
Telephone: 415/433-2250
Facsimile: 415/433-2255

18. Authorization to Charge Additional Fees

- The Commissioner is hereby authorized to charge any additional fees (or credit any overpayment) associated with this communication and which may be required under 37 CFR § 1.16 or § 1.17 to Account No. 50-1697. A duplicate of this transmittal is attached.

March 15 04
(Date)

Attorney Docket No. PRKR-4700

GIRARD & EQUITZ LLP
By: 
Philip A. Girard
Registration No. 28,848
Attorney(s) or Agent(s) of Record